

 U.S. Department of Transportation National Highway Traffic Safety Administration		DOT Auto Safety Hotline Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET:www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 100148	
		Date Received 07-JUN-2005	Repository <input type="checkbox"/>		Reference No. 10124522
OWNER INFORMATION (Type or Print)					
Name		Daytime Telephone Number		E-mail Address	
Address		Evening Telephone Number			
City	State	Zip Code			
WEST HOLLYWOOD	CA				
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.					
Signature of Owner _____ Date ____/____/____					
VEHICLE INFORMATION					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side JTDKB20U753		Make TOYOTA	Model PRIUS	Model Year 2005	
Date Purchased 06-NOV-04	Dealer's Name and Telephone Number TOYOTA OF HUNTINGTON BEACH (714) 847-8555		Engine: No: Cylinders 4	Fuel Type: Other	
Original Owner <input checked="" type="checkbox"/>	Dealer's City HUNTINGTON BEACH	State CA	Zip Code 92648		
Transmission Type AUTOMATIC	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain UNKNOWN	Vehicle Component Code 181000 VEHICLE SPEED CONTROL:ACCELERATOR PEDAL		
			Multiple Failure: 3		
FAILED COMPONENT(S)/PART(S) INFORMATION					
Incident Date(s) 25-APR-2005	Failure Mileage 6000	Failure Speed 65			
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE					
Tire Make	Tire Model (Name or Number)		Tire Size (Example P215/65R15)		
DOT No. (Example: DOTM19ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location:			
Tire Component Code			Tire Failure Type		
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE					
Make:	Date Manufactured:	Model No./Name:			
Seat Type:	Installation System:				
Child Seat Component Code:	Failed Part:				
APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)					
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured	Number of Deaths	Reported to Police N	
Narrative Description of Incident(S), Crash(es), and Injury(ies). Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).					
2005 TOYOTA PRIUS -- FLOORMAT BECOMES LODGED BETWEEN PEDALS. -- WHILE DRIVING AT HIGH SPEEDS (60-70 MPH) ON THE FREEWAY, I NOTICED A LOSS OF SENSITIVITY ON BOTH THE BRAKE AND GAS PEDALS. I HAD TO PRESS VERY HARD TO GET A REACTION FROM EITHER PEDAL. AS A RESULT I WAS UNABLE TO KEEP DRIVING AT THE SAME SPEED AS THE SURROUNDING CARS. EVERYTHING ELSE SEEMED TO BE OPERATING NORMALLY. THE SENSATION CONTINUED FOR A FEW MINUTES UNTIL I COULD SAFELY PULL OFF OF THE FREEWAY. UPON INVESTIGATION, I REALIZED THAT THE FLOORMAT HAD COME UNHOOKED FROM ITS RESTRAINTS AND STUCK BETWEEN THE PEDALS AND THE FLOOR. I SECURED THE FLOORMAT TO ITS HOOKS ONCE AGAIN AND CONTINUED DRIVING WITHOUT TROUBLE. THIS HAS HAPPENED A COUPLE TIMES SINCE, BUT I RECOGNIZE THE SYMPTOMS AND FIX IT PROMPTLY. HOWEVER, I FEAR THAT ANOTHER OWNER MIGHT EXPERIENCE THIS WHEN THEY NEED TO BRAKE OR ACCELERATE SUDDENLY TO AVOID AN ACCIDENT. (I NOTICED ANOTHER POSTING THAT DESCRIBED THE SAME PROBLEM).					
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY					
The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond to this questionnaire. Your response may be used to assist the NHTSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.					

 U.S. Department of Transportation National Highway Traffic Safety Administration		DOT Auto Safety Hotline Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET: www.nhtsa.dot.gov/hotline		FOR AGENCY USE ONLY 100148	
		Date Received 04-JAN-2006		Repository <input type="checkbox"/> Reference No. 10146927	
OWNER INFORMATION (Type or Print)					
Name		Daytime Telephone Number		E-mail Address	
Address		Evening Telephone Number			
City	State	MI	Zip Code		
BATTLE CREEK					
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.					
Signature of Owner _____ Date ____/____/____					
VEHICLE INFORMATION					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side JTDKB20UX53		Make TOYOTA	Model PRIUS	Model Year 2005	
Date Purchased 01-JUL-05	Dealer's Name and Telephone Number		Engine: No: Cylinders 4	Fuel Type: Other	
Original Owner <input checked="" type="checkbox"/>	Dealer's City	State	Zip Code		
Transmission Type AUTOMATIC	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain FRONT WHEEL DRIVE	Vehicle Component Code 185000 VEHICLE SPEED CONTROL:CRUISE CONTROL		
			Multiple Failure: 1		
FAILED COMPONENT(S)/PART(S) INFORMATION					
Incident Date(s) 21-OCT-2005	Failure Mileage 7300	Failure Speed			
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE					
Tire Make	Tire Model (Name or Number)		Tire Size (Example P215/65R15)		
DOT No. (Example: DOTM19ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location:			
Tire Component Code			Tire Failure Type		
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE					
Make:	Date Manufactured:	Model No./Name:			
Seat Type:	Installation System:				
Child Seat Component Code:	Failed Part:				
APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)					
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Deaths 0	Reported to Police N	
Narrative Description of Incident(S), Crash(es), and Injury(ies). Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e, parts repaired or replaced (and if old part is available).					
THE CRITICAL SAFETY CONCERN IS NOTED AS FOLLOWS: ON OCTOBER 21, 2005, I WAS TRAVELING WITH THE CRUISE CONTROL ACTIVE AT 55 MILES PER HOUR. UPON APPROACHING A SLOWER VEHICLE AND CHECKING TRAFFIC, I PROCEEDED TO ACCELERATE THE VEHICLE IN AN ATTEMPT TO QUICKLY PASS THE VEHICLE DRIVING BEFORE ME. UPON SUCCESSFUL PASSAGE OF THE VEHICLE, I LET OFF THE ACCELERATOR AND PRESSED THE BRAKES SEVERAL TIMES, BUT THE VEHICLE CONTINUED TO ACCELERATE UNDER FULL POWER. UNDER THE CONDITIONS, I TRIED TO QUICKLY DISRUPT THIS SAFETY CRITICAL ISSUE. TO THE BEST OF MY RECOLLECTION I TRIED TO SLOW THE VEHICLE BY PUSHING THE POWER BUTTON, MANIPULATING THE CRUISE CONTROL LEVER, AND PUTTING THE VEHICLE IN NEUTRAL. ALL ATTEMPTS WERE UNSUCCESSFUL. UNDER CONSIDERABLE DISTRESS, TRAVELING APPROXIMATELY 20 MILES OVER THE POSTED SPEED LIMIT AT THIS POINT, AND CONTINUING TO ACCELERATE, I ELECTED TO APPLY FULL BRAKING FORCE TO THE PRIUS WHILE "LABORING" THE VEHICLE TO A STANDSTILL ON THE GRAVEL SHOULDER OF THE ROAD. REGAINING MY COMPOSURE, I PUSHED THE POWER BUTTON, AND THE VEHICLE SHUTDOWN. THE CABIN OF THE MOTOR VEHICLE EXHIBITED A STRONG ODOR REMINISCENT OF ELECTRICAL MOTOR SMELL. NO ROOT CAUSE HAS BEEN FOUND TO DATE. VEHICLE WAS DRIVEN BY DEALER AND ISSUE WAS RE-CREATED DURING INITIAL TEST-DRIVE FROM PORTER. *JB					
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice.			ATTACH ADDITIONAL SHEETS IF NECESSARY		
The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond this questionnaire. Your response may be used to assist the NHTSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.					

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		Date Received 13-MAR-2006		Repository <input type="checkbox"/> Reference No. 10152553	
OWNER INFORMATION (Type or Print)					
Name		Daytime Telephone Number		E-mail Address	
Address		Evening Telephone Number			
City	State	MI	Zip Code		
PORTAGE					
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.					
Signature of Owner _____ Date ____/____/____					
VEHICLE INFORMATION					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side JTDKB20U240		Make TOYOTA		Model PRIUS	
Model Year 2004		Date Purchased 01-MAY-04		Dealer's Name and Telephone Number METRO TOYOTA 269-375-1000	
Engine: No: Cylinders 4		Fuel Type: Other		Original Owner <input checked="" type="checkbox"/>	
Dealer's City KALAMAZOO		State MI		Zip Code	
Transmission Type AUTOMATIC		<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control		Powertrain FRONT WHEEL DRIVE	
Vehicle Component Code 180000 VEHICLE SPEED CONTROL		Multiple Failure: 1			
FAILED COMPONENT(S)/PART(S) INFORMATION					
Incident Date(s) 12-MAR-2006		Failure Mileage 12995		Failure Speed 60	
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE					
Tire Make		Tire Model (Name or Number)		Tire Size (Example P215/65R15)	
DOT No. (Example: DOTM19ABC036)		<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair		Failure Location:	
Tire Component Code				Tire Failure Type	
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE					
Make:		Date Manufactured:		Model No./Name:	
Seat Type:		Installation System:			
Child Seat Component Code:		Failed Part:			
APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)					
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Number of Persons Injured	
Number of Deaths		Reported to Police N			
Narrative Description of Incident(S), Crash(es), and Injury(ies). Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e. parts repaired or replaced (and if old part is available).					
DT*: THE CONTACT STATED UPON ENTERING A HIGHWAY AT 60MPH, THE VEHICLE ACCELERATED RAPIDLY. BRAKE PRESSURE WAS APPLIED, BUT THE VEHICLE DID NOT STOP ACCELERATING. EACH TIME BRAKE PRESSURE WAS APPLIED; THERE WAS A LOUD GRINDING NOISE. ALTHOUGH THE CRUISE CONTROL WAS NOT ENGAGED, THE CRUISE CONTROL WAS MANUALLY ACTIVATED IN AN ATTEMPT TO STOP THE ACCELERATION. WITH BRAKE PRESSURE APPLIED, THE CONTACT MANAGED TO EXIT THE FREEWAY USING THE EXIT RAMP. WHEN THE VEHICLE SLOWED, THE PARK BUTTON OPTION WAS PRESSED AND THE VEHICLE STOPPED. THERE WAS NO FURTHER ACCELERATION OR GRINDING NOISE. THE VEHICLE WAS TOWED TO THE DEALER AND IS AWAITING INSPECTION OF THE PROBLEM.					
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY					
The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond this questionnaire. Your response may be used to assist the NHTSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.					



U.S. Department of Transportation
National Highway Traffic Safety Administration

DOT Auto Safety Hotline
Vehicle Owner's Questionnaire
To Report Vehicle Safety Defects
1-888-DASH-2-DOT
(1-888-327-4236)
INTERNET:www.nhtsa.dot.gov/hotline

FOR AGENCY USE ONLY 100148

Date Received	Repository <input type="checkbox"/>
15-JUN-2006	Reference No. 10159914

OWNER INFORMATION (Type or Print)

Name: [REDACTED]
 Address: [REDACTED]
 City: WOODLAND HILLS State: CA Zip Code: [REDACTED]

Daytime Telephone Number: [REDACTED] E-mail Address: [REDACTED]
 Evening Telephone Number: [REDACTED]

Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? YES NO
 In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.
 Signature of Owner _____ Date ____/____/____

VEHICLE INFORMATION

17 digit Vehicle Identification Number Located at bottom of windshield on driver's side JTOK820U853 [REDACTED]	Make TOYOTA	Model PRIUS	Model Year 2005
Date Purchased 02-FEB-05	Dealer's Name and Telephone Number		Engine: No: Cylinders 4
Original Owner <input checked="" type="checkbox"/>	Dealer's City	State	Zip Code
Transmission Type AUTOMATIC	<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control	Powertrain UNKNOWN	Vehicle Component Code 180000 VEHICLE SPEED CONTROL Multiple Failure: 1

FAILED COMPONENT(S)/PART(S) INFORMATION

Incident Date(s) 14-JUN-2006	Failure Mileage 18360	Failure Speed 65
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ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE

Tire Make	Tire Model (Name or Number)	Tire Size (Example P215/65R15)
DOT No. (Example: DOTM19ABC036)	<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location:
Tire Component Code	Tire Failure Type	

ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE

Make:	Date Manufactured:	Model No./Name:
Seat Type:	Installation System:	
Child Seat Component Code:	Failed Part:	

APPLICABLE INCIDENT INFORMATION

(Please describe in detail the incident(s), Failure(s), Crash(es), and injury (ies).)

Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Deaths 0	Reported to Police N
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Narrative Description of Incident(S), Crash(es), and Injury(ies).
 Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e., parts repaired or replaced (and if old part is available).

I WAS DRIVING ON A HIGHWAY AT APPROXIMATELY 65 MPH. VEHICLE SUDDENLY WENT INTO UNCONTROLLED ACCELERATION WHILE THE VEHICLE WAS IN OPERATION ON THE HIGHWAY. THE ONLY WAY THAT I WAS ABLE TO SLOW DOWN THE VEHICLE WAS BY RIDING THE BRAKES. I FINALLY SLOW DOWN THE VEHICLE WITH THE BRAKES AND TURNED IT OFF. SMOKE WAS COMING OUT OF THE WHEELS WHEN THE VEHICLE WAS TURNED OFF. VEHICLE WAS TOWED TO THE DEALER. *NM

Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY

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 U.S. Department of Transportation National Highway Traffic Safety Administration			DOT Auto Safety Hotline Vehicle Owner's Questionnaire To Report Vehicle Safety Defects 1-888-DASH-2-DOT (1-888-327-4236) INTERNET:www.nhtsa.dot.gov/hotline			FOR AGENCY USE ONLY 100148		
			Date Received 21-JUL-2006		Repository <input type="checkbox"/>			
			Reference No. 10163068					
OWNER INFORMATION (Type or Print)								
Name			Daytime Telephone Number		E-mail Address			
Address								
City ELLWOOD CITY		State PA	Zip Code		Evening Telephone Number			
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer. Signature of Owner _____ Date ____/____/____								
VEHICLE INFORMATION								
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side JTDKB20U763				Make TOYOTA	Model PRIUS	Model Year 2006		
Date Purchased		Dealer's Name and Telephone Number			Engine: No: Cylinders 4	Fuel Type: Other		
Original Owner <input checked="" type="checkbox"/>		Dealer's City		State	Zip Code			
Transmission Type AUTOMATIC	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain FRONT WHEEL DRIVE		Vehicle Component Code 181000 VEHICLE SPEED CONTROL:ACCELERATOR PEDAL				
	<input checked="" type="checkbox"/> Cruise Control			Multiple Failure: 1				
FAILED COMPONENT(S)/PART(S) INFORMATION								
Incident Date(s) 19-JUL-2006		Failure Mileage 2100	Failure Speed 50					
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE								
Tire Make			Tire Model (Name or Number)		Tire Size (Example P215/65R15)			
DOT No. (Example: DOTM19ABC036)		<input type="checkbox"/> Original Equipment	<input type="checkbox"/> Prior Repair	Failure Location:				
Tire Component Code					Tire Failure Type			
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE								
Make:			Date Manufactured:		Model No./Name:			
Seat Type:			Installation System:					
Child Seat Component Code:			Failed Part:					
APPLICABLE INCIDENT INFORMATION								
<i>(Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)</i>								
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Number of Persons Injured	Number of Deaths	Reported to Police N		
Narrative Description of Incident(S), Crash(es), and Injury(ies). Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e. parts repaired or replaced (and if old part is available).								
DT*: THE CONTACT STATED, WHILE TRAVELING AT 50 MPH, MERGING WITH HIGHWAY TRAFFIC, THE ACCELERATOR WAS DEPRESSED AND THE VEHICLE CONTINUED TO ACCELERATE UP TO 90 MPH EVEN WHEN PRESSURE WAS TAKEN OFF THE ACCELERATOR PEDAL. PRESSURE WAS APPLIED TO THE BRAKES, BUT THE ENGINE DID NOT DISENGAGE. WITH CONTINUED PRESSURE TO THE BRAKES, THE VEHICLE WAS STOPPED. HOWEVER, THE ENGINE CONTINUED TO RACE AT AN ALARMING RATE. THE IGNITION WAS TURNED OFF. UPON INSPECTION, THE ACCELERATOR PEDAL WAS STILL AGAINST THE FLOORBOARD. AFTER TAPPING THE ACCELERATOR A FEW TIMES WITH A FOOT, THE PEDAL RETURNED TO ITS ORIGINAL POSITION. THE VEHICLE WAS DRIVEN HOME. THE SERVICE DEALER SUGGESTED THAT THE CONTACT TRY TO REPRODUCE THE OCCURRENCE. THE MANUFACTURER WAS CONTACTED. UPDATED 8/14/2006 - *NM								
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY								
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		Date Received 12-MAR-2007		Repository <input type="checkbox"/> Reference No. 10184918	
OWNER INFORMATION (Type or Print)					
Name		Address		Daytime Telephone Number	
City		State		Evening Telephone Number	
EAGLE		CO			
Zip Code		E-mail Address			
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.					
Signature of Owner _____ Date ____/____/____					
VEHICLE INFORMATION					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side JTDKB20U657			Make TOYOTA		Model Year 2005
Date Purchased 13-OCT-05		Dealer's Name and Telephone Number		Engine: No: Cylinders 4	
Original Owner <input checked="" type="checkbox"/>		Dealer's City		Fuel Type: Other	
State		Zip Code			
Transmission Type AUTOMATIC		<input checked="" type="checkbox"/> Antilock Brakes <input checked="" type="checkbox"/> Cruise Control		Powertrain FRONT WHEEL DRIVE	
				Vehicle Component Code 180000 VEHICLE SPEED CONTROL	
				Multiple Failure: 2	
FAILED COMPONENT(S)/PART(S) INFORMATION					
Incident Date(s) 10-AUG-2006		Failure Mileage 14000		Failure Speed 90	
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE					
Tire Make		Tire Model (Name or Number)		Tire Size (Example P215/65R15)	
DOT No. (Example: DOTM9ABC036)		<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair		Failure Location:	
Tire Component Code		Tire Failure Type			
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE					
Make:		Date Manufactured:		Model No./Name:	
Seat Type:		Installation System:			
Child Seat Component Code:		Failed Part:			
APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)					
Crash <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Number of Persons Injured 1	
				Number of Deaths 0	
				Reported to Police Y	
Narrative Description of Incident(S), Crash(es), and Injury(ies). Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e. parts repaired or replaced (and if old part is available).					
2005 TOYOTA PRIUS, 10 MONTHS OLD, 14,000 MILES. MY WIFE EXPERIENCED AN UNINTENDED ACCELERATION WHILE COASTING DOWN INTERSTATE AT 65 MPH WITH FEET OFF PEDALS. VEHICLE SURGED TO 90 MPH EVEN THOUGH SHE APPLIED BOTH REGULAR AND EMERGENCY BRAKE DURING ACCELERATION. SHE CHECKED BOTH FEET ON BRAKES NOT OBSTRUCTED. SHE EXITED INTERSTATE AND CAREENED THROUGH SMALL TOWN EVENTUALLY DITCHING VEHICLE THROUGH FOREST, ENDING UP IN A RIVER AFTER SOMERSAULTING END OVER END 3 TIMES, CLIPPING OFF TREES 10 FEET ABOVE THE GROUND. STATE PATROL INVESTIGATION CONCLUDES ACCELERATOR CAUSED ACCIDENT. NUMEROUS CONTACTS WITH TOYOTA BEGINNING DAY OF ACCIDENT. NO ACTION BY TOYOTA AS OF MARCH 2007. *JB					
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY					
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	Date Received 06-APR-2007		Repository <input type="checkbox"/> Reference No. 10187181		
OWNER INFORMATION (Type or Print)					Daytime Telephone Number [REDACTED]
Name [REDACTED]		Address [REDACTED]			E-mail Address
City MARS HILL		State NC	Zip Code [REDACTED]		Evening Telephone Number
Do you authorize NHTSA to provide a copy of this report to the manufacturer of your vehicle? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO In the absence of an authorization, NHTSA WILL NOT provide your name or address to the vehicle manufacturer.					Signature of Owner _____ Date ____/____/____
VEHICLE INFORMATION					
17 digit Vehicle Identification Number Located at bottom of windshield on driver's side JTDKB20U167 [REDACTED]		Make TOYOTA	Model PRIUS	Model Year 2006	
Date Purchased 01-JAN-06	Dealer's Name and Telephone Number PHIL BACHMAN TOYOTA			Engine: No: Cylinders 4	Fuel Type: Gas
Original Owner <input checked="" type="checkbox"/>	Dealer's City JONONSON CITY		State TN	Zip Code	
Transmission Type AUTOMATIC	<input checked="" type="checkbox"/> Antilock Brakes	Powertrain FRONT WHEEL DRIVE	Vehicle Component Code 185000 VEHICLE SPEED CONTROL:CRUISE CONTROL		
	<input checked="" type="checkbox"/> Cruise Control		Multiple Failure: 1		
FAILED COMPONENT(S)/PART(S) INFORMATION					
Incident Date(s) 15-FEB-2007	Failure Mileage 25000	Failure Speed 65			
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A TIRE FAILURE					
Tire Make		Tire Model (Name or Number)		Tire Size (Example P215/65R15)	
DOT No. (Example: DOTM19ABC036)		<input type="checkbox"/> Original Equipment <input type="checkbox"/> Prior Repair	Failure Location:		
Tire Component Code				Tire Failure Type	
ADDITIONAL ITEMS TO BE COMPLETED WHEN REPORTING A CHILD SEAT FAILURE					
Make:		Date Manufactured:		Model No./Name:	
Seat Type:		Installation System:			
Child Seat Component Code:		Failed Part:			
APPLICABLE INCIDENT INFORMATION (Please describe in detail the incident(s), Failure(s), Crash(es), and injury(ies).)					
Crash <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Fire <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Persons Injured 0	Number of Deaths 0	Reported to Police N	
Narrative Description of Incident(s), Crash(es), and Injury(ies). Please describe (1) events leading up to the failure, (2) failure and its consequences, and (3) what was done to correct the failure; i.e. parts repaired or replaced (and if old part is available).					
TL*- THE CONTACT HAS A 2006 TOYOTA PRIUS WITH A CURRENT ODOMETER READING OF 25,000 MILES. THE CONTACT STATED THAT THE CRUISE CONTROL WOULD NOT DISENGAGED ONCE IT HAD BEEN ACTIVATED. UNDER NORMAL DRY WEATHER CONDITIONS WHEN USING THE CRUISE CONTROL AT ABOUT 65 MPH, AND TRYING TO STOP THE VEHICLE, IT TOOK AT LEAST HALF A MILE BEFORE THE BRAKES WOULD DEACTIVATE THE CRUISE CONTROL. AFTER THIS INCIDENT THE CONTACT HAD THE VEHICLE TOWED TO THE DEALER, AND THEY COULD NOT FIND ANYTHING WRONG. *AK					
Include, if available: Police/Fire Department Report, Photos, and Repair Invoice. ATTACH ADDITIONAL SHEETS IF NECESSARY					
The Privacy Act of 1974-Public Law 93-579 This information is requested pursuant to authority vested in the National Highway Traffic Safety Act and subsequent amendments. You are under no obligation to respond this questionnaire. Your response may be used to assist the NHTSA in determining whether a Manufacturer should take appropriate action to correct a safety defect. If the NHTSA proceeds with administrative enforcement or litigation against a manufacturer, your response, or a statistical summary thereof, may be used in support of the agency's action.					